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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 08/737904-Conf. #5732

Filing Date November 20, 1996

First Named Inventor Irwin J. GRIFFITH

Art Unit 1644

Examiner Name R. B. Schwadron

Attorney Docket Number IMI-040CP3

<u> </u>								
ENCLOSURES (Check all that apply)								
x Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC						
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences						
Amendment/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final	Petition to Convert to a Provisional Application	Proprietary Information						
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter						
X Extension of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below):						
Express Abandonment Request	Request for Refund	Return Receipt Postcard						
Information Disclosure Statement	CD, Number of CD(s)							
Certified Copy of Priority Document(s)	Landscape Table on CD							
Reply to Missing Parts/ Incomplete Application	Remarks							
Reply to Missing Parts under								
SIGNAT	URE OF APPLICANT, ATTORNEY, O	R AGENT						
Firm Name LAHIVE & COCKFIE	=ID IIP							
Signature U. Dorzi								
Printed name Jeanne M. DiGiorgio	7/ 0							
Date October 21, 2004	Reg. No.	41,710						

	is being deposited with the U.S. Postal Service as dment, Commissioner for Patents, P.O. Box 1450,	
Dated: October 21, 2004	Signature:	(Jeanne M. DiGiorgio)

PTO/SB/17 (10-04v2)
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FFE TRANSMITTAL	Complete if Known				
FFF TRANSIVILLAL	09/727004 Conf #E722				

FEETRANSMITTAL for FY 2005			Complete if Known						
			Application Number 08/737904-Conf. #573.						
			Filing Date				November 20, 1996		
			First Named Inventor				Irwin J. GRIFFITH		
Effective 10/01/2004. Patent fees are subject to annual revision.			Examiner Name				R. B. Schwadron		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1644						
TOTAL AMOUNT OF PAYMENT (\$) 1,320.00		Attorney Docket No. IMI-040CP3							
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit Money Other None	3. <i>A</i>	ADDITIO	DNAL	FEES					
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X Deposit Account:	Large Entity Small Entity								
Deposit Account 12-0080	Fee Code	Fee	Fee	Fee	•	Fee Desc	rintion		
Number		(\$)	Code	(\$)		, ee Desc	прион	Fee Paid	
Deposit Account Lahive & Cockfield, LLP		130	2051	65	-	e – late filing fee or oath			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.	e – late provisional filing fee or cover			
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	ish specification			
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a re	request for ex parte reexamination			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1804	920*	1804	920*	Requesting Examiner as	uesting publication of SIR prior to niner action			
	1805	1,840*	1805	1,840*	Requesting Examiner a	publication of ction	f SIR after		
FEE CALCULATION	1251	110	2251	55	Extension fo	or reply within	first month		
1. BASIC FILING FEE	1252	430	2252	215	Extension fo	or reply within	second month		
Large Entity Small Entity	1253	980	2253	490	Extension fo	or reply within	third month	980.00	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,530	2254	765	Extension fo	or reply within	fourth month		
1001 790 2001 395 Utility filing fee	1255	2,080	2255	1,040	Extension fo	or reply within	fifth month		
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of Ap	peal		340.00	
1003 550 2003 275 Plant filing fee	1402	340	2402	170	Filing a brie	ief in support of an appeal			
1004 790 2004 395 Reissue filing fee	1403	300	2403	150	Request for	oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	-		•	ic use proceeding		
SUBTOTAL (1) (\$) 0.00	1452		2452	55		evive – unavo			
	1453		2453	685		to revive - unintentional sue fee (or reissue)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,370	2501		•	·	e)		
Claims below Fee Paid	1502		2502		Design issu				
Total Claims	1503		2503		Plant issue		:		
Claims -3** = x =	1460		1460	130		the Commiss			
Multiple Dependent	1807	50	1807	50	_	fee under 37	/		
Large Entity Small Entity	1806	180	1806	180			n Disclosure Stmt		
Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40		each patent as nes number o	ssignment per f properties)		
1202 18 2202 9 Claims in excess of 20	1809	790	2809	395	Filing a sub (37 CFR 1.1		final rejection		
1201 88 2201 44 Independent claims in excess of 3	1810	790	2810	395	For each ad	additional invention to be			
1203 300 2203 150 Multiple dependent claim, if not paid 1204 88 2204 44 ** Reissue independent claims	1801		2801	395	-	(37CFR 1.129(b)) or Continued Examination (RCE)			
over original patent	1802		1802	900	Request for	for expedited examination			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1	fee (spe	l		of a design	application			
SUBTOTAL (2) (\$) 0.00		uced by I		ling Fee	Paid	SUBTO	TAL (3) (\$)	1,320.00	
**or number previously paid, if greater; For Reissues, see above								,	
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) Jeanne M. DiGiorgio		tration No. 141,710 Telephone (617) 227-7400							
Signature Maryii						Date	October 21, 200)4	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL931675974US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 21, 2004

Signature:

(Jeanne M. DiGiorgio)